

**INSTRUCTIONS FOR COMPLETING THE
CHILD AND ADULT CARE FOOD PROGRAM
RENEWAL APPLICATION FOR SPONSORS OF DAYCARE HOMES**

The application is available at doe.sd.gov/oess/cans/cacfp/applications.asp. If you have computer Internet access, you can download the document and complete it on the computer or print it out and complete it by hand. Note: there are changes from the prior year if you are using a previous copy. Original or agency – approved electronic signatures are acceptable. The application can be submitted on paper or electronically.

Read and follow these instructions carefully. Approval of applications for the nutrition programs is a lengthy process. Your cooperation in submitting them on time and with accuracy will be sincerely appreciated. Please feel free to contact our office with any questions you may have.

The application consists of three parts to be completed and returned with appropriate attachments, along with a Policy Statement, including the letter to parents (two pages), application for free and reduced price meals (two pages), public release, and if a pricing program, the notification letter. One copy of each application part and attachments is to be completed with original signatures and returned to the CANS office. A copy of the approved application packet and an approval letter from the South Dakota Department of Education, Child and Adult Nutrition Services, will be sent to you after it has been determined that the information meets all guidelines and regulations. The narrative (parts 4 and 6) and the regulations, along with policies, instructions, and policy manuals govern the program.

The approved Parts 1, 2, 3, and attachments, as well as the narratives in Parts 4 - 6 are to be kept at the Local Agency for 3 years past the last year of usage, at a minimum. Agreements are approved for three years and renewed annually during the two years in between agreements. For example, if the "base year" agreement (2007-2008) were renewed annually for 2 years (through 2010), Parts 2 - 3 would need to be kept on file for 3 years past 2010 because these parts are approved for three years and only updated in the two renewal years. Agencies that begin Program operation in years after 2007-2008 may not have two renewal years before another base year application is collected.

Complete Parts 1, 2, and 3, sign them as needed, and return them with appropriate attachments. Again, please do not hesitate to contact our office at (605) 773-3413 with any questions as you complete this application packet.

Applications should be submitted to:

Child and Adult Nutrition Services - DOE
800 Governors Drive
Pierre, SD 57501-2235

Claims and Audits should be submitted to:

Finance & Management Services - DOE
700 Governors Drive
Pierre, SD 57501-2291

Again, review of information and approval of the application is a lengthy process. During this time the State must secure and approve your materials if changed from the prototypes in Policy Statement Attachments. If you deviate from any of the attachments (letter to parents, application form, etc.), you must secure written approval from Child and Adult Nutrition Services personnel prior to releasing them for distribution.

Part 1 – Combined Application

All agencies complete and return only one copy of part 1, regardless of how many programs the agency operates. This section has general information about all programs.

A. Local Agency Data

1. Addresses and Phone Numbers – Provide the addresses and phone numbers for the local agency. The Local Agency Number will be assigned by CANS once the application is received in the office. Leave this blank unless the agency operates another Child Nutrition program. The number will remain the same across all Programs. The first address will be used for mail for the authorized representatives for all programs the agency operates unless different names and addresses are designated on Section E on page 2 for the different Programs. The second address requested is one for package delivery. This applies to agencies that use a P.O. Box for their mail or those that desire packages to be delivered to a different address. A street address is required for packages sent through package delivery services.
2. Local Agency Status – Indicate which of the listed items apply to the agency status. Include any required attachments. New Private and Public non-profit local agencies must provide proof of their tax-exempt status under section 501(c) 3 of the amended IRS code. Private, for-profit, non-residential child care agencies may be allowed to participate in the program under certain circumstances. Contact CANS staff members for additional information.

B. Programs

Check the program(s) the local agency is applying to operate. The Food Distribution Program (commodities) box should be checked if the SFA or SFSP agency plans to order commodities. It is possible that the Local Agency is not aware of all Summer Food Service Program plans for summer. The application can be amended to add/change/delete as the time to operate programs draws nearer.

C. Meal/Milk Count Method

It is imperative that all agencies maintain a reliable method for taking meal counts each day at each meal service. There are many acceptable methods for completing meal counts. Check whether point-of-service is used or an alternate method will be used.

Point-of-service means that there is a point in the food service operation where a determination can accurately be made that a reimbursable free, reduced-price, or paid meal, or free or paid milk has been served to an eligible child. This is traditionally at the end of the serving line.

Alternate systems mean the count is taken in a different manner. Alternate systems must be approved by CANS. A few examples include: 1) the meals are served family style and the names of children are checked on the roster immediately after they have been served. 2) Tickets are taken or roster is checked off at the beginning of the meal service line and the last person in the line makes sure that all children have the right number of food items on their trays. 3) Children are seated and their individual meals are brought to them. The names of children are checked on the roster immediately after they have been served. Provide additional information to describe any alternate systems used by each site in the Local Agency.

If your SFA uses a computer software program for daily meal counts please provide the name of the software program or package. CANS often times gets requests from schools and agencies for what programs are being used in South Dakota. The information provided can help CANS give assistance. The information is not released to any companies.

D. Production Records

Production records must be maintained for all special nutrition programs, except the Special Milk Program and in day care homes. A prototype has been provided by the State Agency (CANS) for each program. The one for school meals can be found in SD NSLP Memo #9A. CACFP is in the production records book, and SFSP is distributed at training. If that prototype is used, check that box. If the local agency has developed its

own production record or is using one from a company (such as a computerized method), check the alternate form box and include a completed sample of what is used. If infant meals are claimed, also provide a copy of a completed infant production record form.

E. Personnel

This item requests information for personnel for all programs and the address and contact for commodity delivery. Sometimes the same person is responsible for all areas of all programs. If that is the case, it is not necessary to complete the information over and over again. Just write "same" on the top line of that section. The names of the Programs are in the columns and the information being requested relative to each program is listed in the rows on the left. CACFP applicants should use the second Program column.

NOTE, the form asks you to provide the name and e-mail for someone who can be a second contact person when the first person may not be available. This is only needed for those agencies that have only one person responsible for all areas. This would be used only in emergency situations.

The **Authorized Representative** is the person designated and authorized by the governing board to enter into contracts on behalf of the local agency and must be administratively responsible to Child and Adult Nutrition Services for all administration and operation terms of the Special Nutrition Programs. Include an extension number for the telephone if that type of system is utilized. A separate fax number can also be listed. Sometimes one person in an agency is the authorized representative and signs the agreement, but chooses to designate someone else in the agency to receive correspondence from this office. It is the agency's responsibility to make sure information is appropriately shared.

The **Claim Representative** is the person responsible for completing the claims for reimbursement and the person to be contacted in case of questions regarding the claim. Mail for the claim representative is sent to the mail address from page 1. The phone number for the claim representative should be listed if it is different than that of the local agency or authorized representative. Include an extension number, if appropriate. A separate fax number can also be listed.

The **Food Service Director** is the person responsible for food service/nutrition program operations at the local agency. This person is sometimes located in a different building. A separate mailing address for the food service director can be listed, if needed. Include a telephone extension number, if appropriate. A separate fax number can also be listed.

The **Commodity Delivery Address** is the physical address where the commodities will be delivered if the agency receives commodities. Commodities are not available for Child & Adult Care Food Program agencies so this section does not need to be completed for this Program. CACFP agencies receive a cash-in-lieu rate to be able to purchase product that is more readily usable for small groups.

F. Site Summary

This item asks for the name of each attendance center and some relative information in regard to that center. Each attendance center should be listed, whether or not they are all in the same building. The columns on the left list the various programs in which a site can participate. The city is needed to help identify the site. The type of center varies by program. See site types on next page. For sponsors of homes, provide the name of each day care provider along with the provider's mailing address and the date of birth. Also, make sure to indicate which homes are registered as Day Care Homes and which are licensed as Group Family Day Care Homes.

CHILD AND ADULT CARE FOOD PROGRAM

ADCC – Adult Day Care Center
 ASC – After School Care
 CC – Child Care Center
 CCHH – Child Care Center - Head Start & Early Head Start
 CCOO – Child Care Center or other
 DCH – Day Care Home
 ES – Emergency Shelter
 GFDCH – Group Family Day Care Home
 OSH – Outside School Hours
 XX – TXX or for-profit center

SUMMER FOOD SERVICE PROGRAM

CAMP – Residential Camp
 ENRL – Enrolled Site
 MIGR – Migrant
 NRC – Nonresidential Camp
 NYSP – National Youth Sports Program
 OPEN – Needy Area

NATIONAL SCHOOL LUNCH AND SCHOOL BREAKFAST

RCCI – Residential Child Care Institution
 ELSCH – Elementary School
 MSCH – Middle School
 JHSCH – Junior High School
 PSCH – Pre School
 SHSCH – Senior High School

SPECIAL MILK ONLY

NPN – Nonprofit Nursery
 SC – Summer Camp
 ELSCH – Elementary School
 MSCH – Middle School
 JHSCH – Junior High School
 SHSCH – Senior High School
 PSCH – Pre School
 SH – Settlement House
 SVCI – Service Institution
 RCCI – Residential Child Care Institution

The columns on the left list the various programs in which a site can participate. CACFP applicants should complete the CACFP rows (2nd section from the bottom).

Begin Date – list the beginning date of program operations in the federal fiscal year. The application covers the federal fiscal year of October 1 through September 30. If the local agency operates year round, the begin date should be listed as the date the agency would like to begin Program operations at the site.

End Date – list the end date of program operations in the federal fiscal year. The application covers the federal fiscal year of October 1 through September 30. If the local agency operates year round, the end date should be listed as September 30th.

Operating Days per Week – Circle the days of the week that the attendance center is open.

Total Number of Operating Days – Indicate the number of days the attendance center intends to operate in this program year (October 1st through September 30th).

G. Contracts

Circle Yes or No for each question. On the lines below, list any contracts that were answered with a "yes" and attach a copy of that contract for approval. CANS staff must approval all contracts.

H. Attachments

Include copies of required documentation and check which documents are attached. New Local Agencies that are private or public nonprofit must provide proof of their tax-exempt status under section 501(c)3 of the amended IRS code.

I. Authority

The authority for program operation is provided in Section I.

J. Assurances

This section provides assurances that the program will be operated according to program requirements, that the agency has not been suspended or debarred.

Part 2 – Application to the Child and Adult Care Food Program

A. Local Agency Information

1. Fill in the Local Agency name and the Local Agency number. Child and Adult Nutrition Services (CANS) assigns this number (see last year's approved application).
2.
 - A. Write in the number of family daycare and group family daycare homes currently under the local agency's sponsorship. These numbers should agree with the information provided in the Combined Application Part 1F.
 - B. Write in the total number of homes the agency has approved as Tier 1. Also, provide the breakout of the number of homes approved based on school data, census, or provider's income.
 - C. Write in the total numbers of children enrolled in Tier 1 homes. Sign the assurance statement the providers' own children will only be claimed when the provider is eligible by income.
 - D. Write in the total number of homes the agency has approved as Tier 2 only (no children receive Tier 1 rates).
 - E. Write in the total number of homes the agency has approved as Tier 2 mix (homes where any number of children receive Tier 1 rates).
 - F. Write in the total number of children enrolled in Tier 2 and/or Tier 2 mix homes (combined).
 - G. Write in total number of children eligible for Tier 1 rates in Tier 2 homes.
3. **Contracts** – All contracts must be listed here, a copy of each contract must be included with the application, and each contract must be approved by the State Agency. A sample Food Service Management Company Contract with bidding procedures is available from the State Agency on request. A prototype agreement between a school and a center can also be requested if the agency wishes to purchase meals from a school.
4. **Attachments** – Indicate which applicable attachments are included with the application. Note that some are required for all, while others are only required if changes have been made.
5. **Amendment to the 3-Year Application** – NOTE: This is a renewal application. The 2007-2008 application (or "new center" application if the agency did not participate in 2007-2008) is considered to be in effect until such time that another base year application is collected from the agency. It is the responsibility of the local agency to review the approved 2007-2008 application (parts 2 and 3) and to submit any changes to this application. **Changes must be highlighted** and submitted to Child and Adult Nutrition Services (CANS) with this renewal application. If needed, forms for 1) reporting new Publicly Funded Programs, 2) adding or removing board members, and/or 3) naming a new Authorized Representative (Certificates of Authority) can be found in the Part 6 of the application packet.

B. Sponsoring Organization Management Plan

1. **Training** – Annual training is required for all key staff (including all monitoring staff) and all day care home providers.

a. **Training Verification** – The agency must provide documentation of the CACFP training provided to each key staff (including each day care home provider) during the 2007-2008 Program year. Documentation should include a copy of the agendas for each training session. Agendas must indicate the topics covered (all topics listed on the application must be covered annually). A copy of the sign in sheets must also be provided so as to show proof that all key staff were trained in their areas of job responsibility during the most recent prior Program year. If documentation is not available, the agency will be required to train all key staff (or take action to terminate the providers not in compliance with the annual training requirement) before this renewal application can be approved.

b. **Training Plan** – It is the responsibility of the local agency to ensure that all key staff at each facility sponsored by the agency receive annual training specific to the CACFP duties they perform. This training requirement can be met for administrative staff by: a) the local agency providing annual training (provided that there are experienced staff who are qualified to provide the training); b) attendance at the state agency workshops (Basic Training and CACFP Plus! workshops cover all required topics); c) viewing CACFP training videos available to be checked-out from the state agency (Basic Training workshop is available on video). Be advised, however, that using attendance at the state agency workshop will require that key staff do attend the workshop or an amendment to the application will be needed. Failure to participate in annual training is considered a serious deficiency. Complete the charts to indicate the training plans for the agency for the upcoming program year (October 1, 2008 through September 30, 2009) for both administrative staff and day care home providers. Separate schedules must be provided for administrative staff and day care home providers.

2. **Monitoring** – Each day care home must be reviewed at least three times each year. Also, at least one review must be made during each day care home's first four weeks of program operations and not more than six months may lapse between reviews. All new day care homes must be monitored within the first 4 weeks of Program operation. It is allowable to complete an "average" of 3 reviews per home. This means that some homes will be reviewed twice while others are reviewed 4 times as long as the total number of reviews averages out to 3 per home. If the sponsor chooses this option, provide a specific explanation of what conditions must be met to "eliminate" one review to any one home. Also, provide a specific explanation of how the homes will be chosen to have an additional review completed. If this averaging provision is used, the first review in each program year must occur no more than 9 months after the previous review. Also, a home that has submitted a block claim during the year may NOT be reviewed fewer than 3 times during that Program year. Note that the local agency is responsible for monitoring each meal type approved (including breakfasts and supper) at each site.

C. **Administrative Budget** – Budget revisions must be submitted if the number of homes increases significantly from the number estimated.

1. a. Indicate the number of homes the upcoming year's budget is based on and using the current rates of reimbursement, complete the chart to determine the amount to be budgeted.

b. **Audit Requirements** – If the agency received and spent over \$500,000 in federal financial assistance in the prior fiscal year, an A133 audit is required. Indicate the date of the last financial audit and the firm doing the audit. If the agency did not receive and expend over \$500,000 in federal financial assistance, the agency is exempt from audit. Mark the appropriate box and complete this section if an audit is required.

- c. **Advance Payment Request** – Full or partial advance payments can be requested at the beginning of the program year or at a later time if the sponsor chooses. The amount of advance payment is based on an average claim. The advanced amount is deducted from the monthly claim for reimbursement.
- d. **Multi-State Operations** – All agencies must complete question (i). If the answer to question (i) is “yes” then you must complete questions (i)-(iii). For question (ii), indicate if the parent organization or the local agency is financially and/or administratively responsible for the organization. For question (iii), provide an answer yes or no.
- e. **Budget** – Provide the specific information, as requested in (i)-(xvii) on the application. The total for each line item must be recorded on the chart to follow the worksheet. Notice that some items require prior approval or specific prior written approval from the State Agency. The local agency budget will be limited in that no more than 15% of total reimbursement may be spent on administrative expenses.
- f. **Resource Allocation for Monitoring Duties** – The state agency has the responsibility of ensuring that the local agency is allocating sufficient resources to the monitoring duties. Report all costs related to monitoring, including items such as salaries, supplies, mileage, meals, lodging, etc. When calculating the salaries, make sure to only include the time spent on monitoring duties. These duties would include conducting the actual reviews and all travel involved for the reviews, any correspondence with the site in relation to the findings on the review, etc.

D. Assurance Statement

This section must be signed by the Authorized Representative (as listed in Section E of Part 1 – Combined Application). If this person is new to the position since the approved 2007-2008 budget a new certificate of authority must be completed (see part 3 for the form to use). This section provides assurances that the program will be operated according to program requirements and that the local agency or its principals have not been suspended or debarred.

Part 3 – Policy Statement for Free and Reduced Price Meals

Each agency must return the appropriate program policy attachments (provider agreement, provider application for participation, addendum to the provider agreement, public release, letter to providers, and application for Tier 1 reimbursement, provider application for Tier 1 reimbursement, provider notification of eligibility determination, and letter to households in Tier 2 homes and family income statement). If the local agency plans to use the forms as they are, indicate that on each form. If changes are made, they must be submitted for approval prior to use.

Attachment A – INCOME ELIGIBILITY GUIDELINES – To be used by the local agency officials in determining eligibility.

Attachment B – PROVIDER AGREEMENT PROTOTYPE – In compliance with 7 CFR 226.18, the sponsoring organizations must enter into an agreement with each daycare home provider which specifies the rights and responsibilities of both parties. If the local agency has any additional requirements (e.g. earlier deadlines for submissions of claims, etc), these must specifically be stated in this agreement or in an addendum to this agreement. If additional requirements have been specified in an addendum to the agreement, a copy of the addendum must also be sent.

Attachment C – **PROVIDER APPLICATION FOR PARTICIPATION PROTOTYPE** – To be used by the provider in application for the CACFP which specifies various aspects of their daycare operation to the sponsor.

Attachment D – **ADDENDUM TO THE PROVIDER AGREEMENT** – This addendum is a signed statement by the provider and the sponsor indicating that the provider is determined either Tier 1 based on school data, census data, or provider income or Tier 2. If provider is determined Tier 2, the sponsor must inform the provider of the three different options available for receiving reimbursement.

Attachment E – **PUBLIC RELEASE** – The public release must annually be submitted to the local news media. The local agency is not required to pay for publication of the release. A copy of the public release as submitted to the media must be submitted to Child and Adult Nutrition Services and maintained in the permanent files.

Attachments F1-F4 – **LETTER TO PROVIDERS & APPLICATION FOR CLAIMING TIER 1 REIMBURSEMENT** – This letter and application is for providers who want to establish eligibility as a Tier 1 home in the CACFP or for providers who want to claim their own children in the program. These attachments also include instructions for completing the Tier 1 reimbursement application and information regarding the verification/supporting documents to submit.

Attachment G – **PROVIDER NOTIFICATION OF ELIGIBILITY** – The sponsor will use this form to notify each daycare home provider, applying for Tier 1 reimbursement, of his or her eligibility determination.

Attachments H1-H4 – **LETTER TO HOUSEHOLDS WITH CHILDREN IN TIER 2 HOMES AND FAMILY INCOME STATEMENT** – At the provider's request, the sponsor will provide this letter and family income statement to families of Tier 2 providers to determine the eligibility of enrolled children for Tier 1 reimbursement. These attachments also include the Income eligibility guidelines and instructions for completing the family income statement.

Attachment I – **CIVIL RIGHTS DATA COLLECTION** – Regulations require that racial/ethnic data **be collected annually**. This information must be collected for the local agency and the area served and maintained on file for three years beyond the current year. You do not need to return this attachment to Child & Adult Nutrition Services.

Attachment J – **APPEAL PROCEDURES FOR DAY CARE HOMES** – These procedures must be provided to each day care home annually, at any time such action is taken, and at any other time upon request.

Attachment K – **PUBLICLY FUNDED PROGRAMS** – This is the form to use should the agency need to report new publicly funded programs which the local agency and/or its principals have participated in within the past seven years. This form only needs to be completed if additional programs need to be reported since the 2004-2005 (or more recent) new center application or the 2005-2006 renewal application were approved.

Attachment L – **INSTITUTION PRINCIPALS** – This is the form to use should the agency need to report new institution principals (or changes of positions – such as a new board president). This form only needs to be completed if new principals need to be reported since the 2007-2008 sponsor application was approved.

Attachment M – **CERTIFICATE OF AUTHORITY** – This is the form to use should the agency need to designate a new Authorized Representative for the Child and Adult Care Food Program. This form only needs to be completed if the Authorized Representative is new to the position this year. If a new authorized representative is named for the Program, the local agency will also need to complete and return Attachment G to add this individual as an Institution Principal.